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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/620 497	07/16/2003	David L. Th <del>omps</del> on	P-8841.01	9062	
10/620 497	07/10/2005		1 00 12102	,,,,_	

TITLE OF INVENTION: VARIABLE ENCRYPTION SCHEME FOR DATA TRANSFER BETWEEN MEDICAL DEVICES AND RELATED DATA MANAGEMENT SYSTEMS

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MULLEN, KRIS	TEN DROBSCH	3766		607-060000	_		,
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SR/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SR/47; Rev 03-02 or more recent) attached. Use of a Customar Number is required.		2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		a member a		LIG. Chapik LUbdde-Micba	
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Minneapolis, MN Medtranic, Inc.

Please check the appropriate assignee category or categories (will not be printed on the potent): 🔲 Individual 'Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fcc
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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